

PART B - FEE(S) TRANSMITTAL

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21691 7590 05/04/2005

CROMPTON SEAGER AND TUFTE, LLC
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Kathleen L. Boekley (Depositor's name)
Kathleen L. Boekley (Signature)
 August 3, 2005 (Date)

08/03/2005 CNGUYEN1 00000043 500413 10015202

01 FC:2501 700.00 DA

02 FC:1504 300.00 DA

03 FC:8001 3000 DA

APPLICATION	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/015,202	11/05/2001	Alan H. Ostroff	032580.0045.CIP	7091

TITLE OF INVENTION: CURRENT WAVEFORMS FOR ANTI-TACHYCARDIA PACING FOR A SUBCUTANEOUS IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	08/04/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
MULLEN, KRISTEN DROESCH	3762	607-014000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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 2
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Cameron Health, Inc.

San Clemente, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies one (1)

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- ☐ A check in the amount of the fee(s) is enclosed.
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

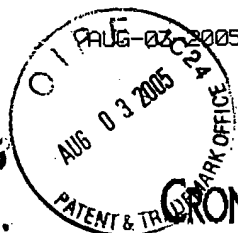
Authorized Signature

Date

Typed or printed name David M. CromptonRegistration No. 36,772

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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FAX TRANSMISSION COVER LETTER

TO: Commissioner for Patents
Attn: Mail Stop Issue Fee
P.O. Box 1450
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DATE: August 3, 2005
FROM: David M. Crompton
OUR REF: 1201.1136101
TELEPHONE: 612-677-9050

Total pages, including cover letter: 3

PTO FAX NUMBER: 703-746-4000

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Title of Document(s) Transmitted: ISSUE FEE TRANSMITTAL IN DUPLICATE

Applicant: Alan H. Ostroff et al.

Serial No.: 10/015,202

Filed: November 5, 2001

Group Art Unit: 3762

Our Ref. No.: 1201.1136101

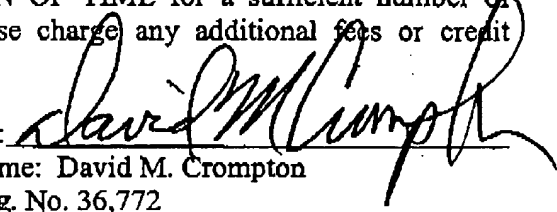
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By: 
Name: David M. Crompton
Reg. No. 36,772

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.


Name: Kathleen L. Boekley

August 3, 2005
Date